PTO/SB/22 (09-06)
Approved for use through 03/31/2007. OMB 0651-0031
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PETITIO	ON FOR EXTENSION OF TIME UNDER 37	Docket Number (Optional)									
/F	FY 2006	31759-1	90543								
	pursuant to the Consolidated Appropriations Act, 2	Filed lun	26 2002								
Applicati	on Number 10/603,835	Filed Jun	e 26, 2003								
For "INFORMATION PARTITIONING APPARATUS, INFORMATION PARTITIONING METHOD"											
Art Unit	2178		Examiner D	avid Farber							
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application. The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):											
	(Fee	Small Entity Fee	,							
ſ	X One month (37 CFR 1.17(a)(1))	\$120	\$60	\$ 120							
	Two months (37 CFR 1.17(a)(2))	\$450	\$225	\$							
	Three months (37 CFR 1.17(a)(3))	\$1020	\$510	\$							
Ī	Four months (37 CFR 1.17(a)(4))	\$1590	\$795	\$							
Ī	Five months (37 CFR 1.17(a)(5))	\$2160	\$1080	\$							
Applicant claims small entity status. See 37 CFR 1.27.											
=	A check in the amount of the fee is enclosed. Payment by credit card. Form PTO-2038 is attached.										
=			innlication to a Denosit	Account							
The Director has already been authorized to charge fees in this application to a Deposit Account. The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 22-0261 . I have enclosed a duplicate copy of this sheet.											
I am the applicant/inventor.											
assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).											
	x attorney or agent of record. Re	egistration Number	33,074	_							
	attorney or agent under 37 CFI										
Registration number if acting under 37 CFR 1.34											
	Cather 11/ June	November 17, 2006									
	Signature \	Date									
	Catherine M. Voorhees	(202) 344-4000									
	Typed or printed name		Telephone	Number							
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.											
x	Total of forms are submit	itted.		_							

::ODMA\PCDOCS\DC2DOCS1\804216\1

PTO/SB/17 (12-04v2)
Approved for use through 7/31/2006. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL				Complete if Known								
				Application Nu	mber	10/603,835	0/603,835					
				Filing Date		June 26, 2003						
				First Named Inventor Atsushi II			(ENO					
For FY 2006				Examiner Name David Farb								
Applicant claims small entity status. See 37 CFR 1.27				74t Offit		2178						
TOTAL AMOUNT OF PAY	Attorney Docket No. 31759-190543											
METHOD OF PAYMENT (check all that apply)												
Check Credit Card Money Order None Other (please identify):												
X Deposit Account Deposit Account Number: 22-0261 Deposit Account Name: Venable LLP												
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)												
x Charge fee(s	indicated be	elow		Charge	e fee(s) in	dicated below, e	xcept for t	he filing fee				
Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17												
FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)												
1. BASIC FILING, SEARCI	•											
	FILIN	G FEES Small Entity	SEA	RCH FEES Small Entity	EXAMI	NATION FEES Small Entity						
Application Type	Fee (\$)	Fee (\$)	Fee (\$)		Fee (\$)	Fee (\$)	Fees I	Paid (\$)				
Utility	300	150	500	250	200	100						
Design	200	100	100	50	130	65						
Plant	200	100	300	150	160	80						
Reissue	300	150	500	250	600	300						
Provisional	200	100	0	0	0	0						
2. EXCESS CLAIM FEES							Foo (t)	Small Entity				
Fee Description Each claim over 20 (including Reissues) Fee (\$) Fee (\$) 50 25												
Each independent claim over 3 (including Reissues)							200	100				
Multiple dependent claims					360	180						
	Extra											
Total Claims C		ee (\$)	Fee P	aid (\$)	<u>M</u>	ultiple Depende	ent Claims					
- 20 or HP	×				<u>Fe</u>	ee (\$)	Fee Paid (\$	<u> </u>				
HP = highest number of total cla		f greater than 20).									
	Extra Iaims F	ee (\$)	Fee P	aid (\$)								
- 3 or HP =	x -	=		(47				İ				
HP = highest number of total cla	ims paid for, i	f greater than 3.						ŀ				
3. APPLICATION SIZE FEI												
If the specification and dr												
listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).												
	tra Sheets			Iditional 50 or frac		of Fee (\$)	Fee	Paid (\$)				
							=					
100 = /50 (round up to a whole number) x 4. OTHER FEE(S)							Fees	Paid (\$)				
Non-English Specificati	on, \$130 fe	ee (no small e	ntity disc	ount)								
Other (e.g., late filing												
surcharge):		One Mor	nth Exter	nsion Fee			<u> </u>	120				
SUBMITTED BY			/									
Signature	///	(bal	(0)	Registration No. (Attorney/Agent)	33,074	Telephone	(202) 34	44-4000				
Name (Print/Type) Catherine	M. Voorh	es	7			Date	Novembe	г 17, 2006				

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete the form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.